

JOB NO. 4592 NATIONAL MARINE
BARGE: DM-964 3/95

HER 01599

FOREMAN'S DAILY TIME REPORT

JOB NO. 4592

DATE 3-12-95

CLASS NO. Dm-964

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thrift wage to
cleaning such
+ then clean

Strip & Blow

HER 01600

IGNED

FOREMAN

CODED
AND
EXTENDED
BY

APPROVED
BY

EQUIPMENT	HOURS USED	HOURLY RATE	TOTAL PRICE
2 - COMPRESSOR	5 HRS EA 10 HRS	44.00	
6 - AIR MOVERS	" " 30 HRS	5.00	
VACUUM	2 HRS	20.00	
BOILER		80.00	
HAND HOSE	2 HRS	10.00	
BUTTERWORTH		10.00	
2" STRIP PUMP		12.00	
3" DIESEL PUMP		14.00	
4" ELECT PUMP		15.00	
CRANE		130.00	
CHERRY PICKER		50.00	
FORKLIFT	1 HR	20.00	
TUG BOAT		80.00	
WELD MACHINE		45.00	
CUTTING RIG		8.00	
WORK BARGE		35.00	
HAUL OUT		1100.00	

DATE: 3-12-95 JOB NO: 4592 BARGE NAME: Dm - 964

HER 01601

HERCULES

MARINE SERVICES CORPORATION

P. O. Drawer O • Freeport, Texas 77541

INVOICE NO. : 2874-95

DATE : March 17, 1995

Job No. : 4592-1

Location : Freeport Yard

TO: National Marine Services Corp
P. O. Box 52189
New Orleans, La. 70152-2189

PLEASE REMIT PAYMENTS TO:
11011 RICHMOND
SUITE 500
HOUSTON, TX. 77042

Terms : Net 30

FOR: Services to the barge DM-964 as follows:

Set up equipment
Strip out all free product
Blow cargo pipeline and stripping system
Vacuum blow dry cargo tanks
Sweep powder rust from cargo tank floors
Wash and strip deck around engine and headers
Pressure test cargo pipeline to 40# psi
Clean off deck
Remove equipment
Close barge

Labor: Leadman	6 @ 48.00	\$ 288.00
Journey	1 @ 31.00	31.00
	19 @ 44.25	840.75
Stock Material:	50.50 + 10.10	60.60
	(flashlights and coveralls)	
Equip:		
Compressor	10 @ 44.00	440.00
Air Movers	30 @ 5.00	150.00
Forklift	1 @ 20.00	20.00
Vacuum	2 @ 18.00	36.00
Hand Hose	2 @ 10.00	20.00
TOTAL AMOUNT DUE:		\$1,886.35

Arrived: 3/12
Completed: 3/12
Product: Methanol

HER 01602

PHONE: (409) 233-6371

HERCULES OFFSHORE CO.

INVOICE NO. _____

MARINE REPAIR

MARINE OPERATIONS FACILITY

CUSTOMER P.O. _____

ORDER No. 4592

DATE	ORDER WRITTEN	ETA
	ARRIVAL	3-11-95
	COMPLETION DATE	
	DEPARTURE DATE	
HULL <input type="checkbox"/> BARGE <input checked="" type="checkbox"/>		
NAME <u>DM-964</u>		
LOA _____ WIDTH _____		
FOREMAN <u>Clavellio Devante</u>		
LAST PRODUCT <u>Methanol load: Acetone</u>		
GAS FREEING YES <input type="checkbox"/> NO <input type="checkbox"/> CERTIFICATE REQUIRED YES <input type="checkbox"/> NO <input type="checkbox"/>		
HAUL OUT FOR INSPECTION AND REPAIR YES <input type="checkbox"/> NO <input type="checkbox"/>		
ON WAYS _____ DATE: _____		
ON WAYS _____ DATE: _____		

CUSTOMER	NAME	<u>National Marine</u>
	BILLING ADDRESS	<u>52179</u>
	CITY AND STATE	<u>P.O. Box 128</u>
	PHONE NUMBER	<u>LA 70112</u>
WORK AUTHORIZED BY <u>Nancy - 1-504</u>		BY AUTHORIZED BY <u>529-8615</u>
STOCK MATERIAL <input type="checkbox"/> YES <input type="checkbox"/> NO		
IF YES, COMPLETE STOCK MATERIAL TRANSFER TICKET		
OUTSIDE SERVICES <input type="checkbox"/> YES <input type="checkbox"/> NO		
IF YES, LIST		

ITEM NUMBERS

- 1 Strip & Blow dry
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

THIS SHALL SERVE AS YOUR AUTHORIZATION TO PROCEED WITH THE ABOVE.

Signed: _____ Date: _____

HER 01603

HERCULES OFFSHORE CO.

INVOICE NO. _____

MARINE REPAIR

MARINE OPERATIONS FACILITY

CUSTOMER P.O. _____

ORDER No. 4592

DATE	ORDER WRITTEN	ETA
	ARRIVAL	3-11-95
	COMPLETION DATE	3-12-95
	DEPARTURE DATE	3-12-95
DEPARTURE TIME		11:30 Pm
M/V <input type="checkbox"/> BARGE <input checked="" type="checkbox"/>		
NAME		DM-964
LOA		
FOREMAN		C. Duarte
LAST PRODUCT		Methanol load: Acetone
GAS FREEING		YES <input type="checkbox"/> NO <input type="checkbox"/>
CERTIFICATE REQUIRED		YES <input type="checkbox"/> NO <input type="checkbox"/>
HAUL OUT FOR INSPECTION AND REPAIR		YES <input type="checkbox"/> NO <input type="checkbox"/>
ON WAYS		DATE: _____
ON WAYS		DATE: _____

CUSTOMER	NAME	National Marine
	BILLING ADDRESS	52189 P.O. Box 128
	CITY AND STATE	LA 70112
	PHONE NUMBER	713-452-5544
WORK AUTHORIZED BY		OFF AUTHORIZED BY
Nancy -1-504-529-8615		
STOCK MATERIAL		<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, COMPLETE STOCK MATERIAL TRANSFER TICKET		
OUTSIDE SERVICES		<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, LIST		

ITEM NUMBERS

- 1 Strip & Blow dry
- 2 3 Flashlight Batteries, 2 Paper Covers all,
45.00 5.50 27.50
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

THIS SHALL SERVE AS YOUR AUTHORIZATION TO PROCEED WITH THE ABOVE.

Signed: _____ Date: _____

HER 01604

JOB NO: 4592 BARGE NAME: Dm-964 DATE: 3-12-95

W O R K S C O P E

SETUP EQUIPMENT ✓
STRIP OUT ALL FREE PRODUCT ✓
HOT WATER WASH AND BLOW PIPELINE AND STRIPPING SYSTEM _____
HOT WATER WASH CARGO TANKS _____
COLD WATER WASH PIPE LINE AND STRIPPING SYSTEM _____
COLD WATER WASH CARGO TANKS _____
HOT CHEMICAL WASH _____
BLOW CARGO PIPELINE AND STRIPPING SYSTEM ✓
VACUUM BLOW DRY CARGO TANKS ✓
SWEEP POWDER RUST FROM CARGO TANK FLOORS ✓
WASH AND STRIP DECK AROUND ENGINE AND HEADERS ✓
PRESSURE TEST CARGO PIPELINE TO 40# PSI ✓
CLEAN OFF DECK ✓
REMOVE EQUIPMENT ✓
CLOSE BARGE ✓

STRIP DRIP PANS

HER 01605

JOB WORKSCOPE/BREAKDOWN

JOB NO: 4592 CUSTOMER: National BARGE: Dm-964

FOREMAN:	S/T	@36.00	\$	
	O/T	@51.75		
LEADMAN:	S/T	@33.50		
	O/T	<u>6</u> @48.00		<u>288.00</u>
JOURNEY:	S/T	<u>1</u> @31.00		<u>31.00</u>
	O/T	<u>19</u> @44.25		<u>840.75</u>

2879.25

DISPOSAL: _____ GAL @ .35

MATERIAL: _____ PLUS 20%

STOCK MATERIAL: 50.50 PLUS 20% 10.10

flashlights, candles

EQUIP:

COMPRESSOR	<u>10</u>	@ 44.00	<u>440.00</u>
AIR MOVERS	<u>30</u>	@ 5.00	<u>150.00</u>
FORKLIFT	<u>1</u>	@ 20.00	<u>20.00</u>
TUGBOAT		@ 80.00	
STEAM RIG		@ 80.00	
VACUUM	<u>2</u>	@ 18.00	<u>36.00</u>
HAND HOSE	<u>2</u>	@ 10.00	<u>20.00</u>
WELDING MACHINE		@ 15.00	
CHERRY PICKER		@ 50.00	
CRANE		@ 130.00	
FLATBED TRUCK		@ 20.00	
3" GAS PUMP		@ 14.00	
2" STRIP PUMP		@ 12.00	
BUTTERWORTH		@ 10.00	
4" ELECTRIC PUMP		@ 15.00	
WORK BARGE		@ 35.00	
CUTTING RIG		@ 8.00	
HAUL OUT		@ 1100.00/day	

ARRIVED: 3/12/ COMPLETED: 3/12 DEPARTED: _____

4:30 P to 11:30 P

PRODUCT: Mechanical LOAD: _____

TOTAL INVOICE:

1,886.35

Job #: 4592	Invoice #:
Date Started: March 12, 1995	Date Finished: March 12, 1995
Job Type: CLEANING	
Customer: NATIONAL MARINE	Barge Name/#: DM-964

WASTE WATER DISPOSAL			
# of Gallons:	x \$ 0.35	per gallon =	\$: 0.00

[illegible][illegible]**HER 01607**

TOTAL MATERIALS : 0.00

LABOR HOURS

Emp#	Employee Name	Init	Pay1	Hours	Total	Pay2	Hours	Total
40	OLIVAREZ	J	16.48		0.00	22.62	6.50	147.03
272	RIVERA	J	12.70		0.00	17.28	6.50	112.32
179	DUARTE	C	15.31		0.00	20.96	6	125.76
41	PETTIT	S	17.27	1	17.27	23.73	6	142.38
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
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LABOR HOURS con't

Emp#	Employee Name	Init	Pay1	Hours	Total	Pay2	Hours	Total
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
:	:	:	:	:	0.00	:	:	0.00
TOTAL				1	17.27		25	527.49

HER 01608



DATE: 3-12-95

4592

BARGE NAME: DM 964

OVERHEAD: _____

BOAT NAME: _____

OFFSHORE: _____

TIME START: 4:30 PM

TIME STOP: 11:30

NAME: ✓

HOURS:

DANIEL HERNANDEZ

JOE OLIVAREZ

TRIN? RODRIGUEZ

SAM PETTIT

7

JIMMY JACKSON

CARRIEL DE LA ROSA

RICHARD RODRIGUEZ

DOMINCO CUEL

JUAN RIVERA

CLAUDIO DUARTE

LARRY BALLINGER

JOB DESCRIPTION: Remove DC 353 from Cleaning
dock and shift DM 964 to Cleaning dock, then
proceed to clean DM 964

HER 01609

T I M E S H E E T

DATE: 3-12-85

BARGE NAME: D. M. 964

OVERHEAD: ^

BOAT NAME: _____

OFFSHORE: _____

TIME START: 5.30

TIME STOP: 11:30 P m

NAME :

HOURS :

DANIEL HERNANDEZ

JOE OLIVAREZ

TRINO RODRIGUEZ

SAM PETTIT

JIMMY JACKSON

GABRIEL DE LA ROSA

RICHARD RODRIGUEZ

DOMINCO GUEL

JUAN RIVERA

CLAUDIO DUARTE

LARRY BALLINGER

JOB DESCRIPTION: Strip Blow dry.

HER 01610

T I M E S H E E T

DATE: 3-12-95

BARGE NAME: _____

OVERHEAD: X

BOAT NAME: DM-964

OFFSHORE: _____

TIME START: 4:30 PM.

TIME STOP: 5:30 PM

NAME: _____ HOURS: _____
=====

DANIEL HERNANDEZ

JOE OLIVAREZ ✓ 11

TRINO RODRIGUEZ

SAM PETTIT ✓ 11

JIMMY JACKSON

GABRIEL DE LA ROSA

RICHARD RODRIGUEZ

DOMINCO CUEL

JUAN RIVERA ✓ 11

CLAUDIO DUARTE

LARRY BALLINGER

JOB DESCRIPTION: MOVE BARGE = 353 = AND DM-964



P.O. Drawer O
Freeport, Texas 77541

Office: (409) 233-6371
Fax: (409) 233-6375

Strength through experience, equipment, know-how

FINAL CHECK LIST

DATE: 3-12-95

BARGE: D.M. 964

BLND NUMBER CHECKED 2 REPLACED GASKET YES NO ✓
GATE VALVE NUMBER CHECKED 5 REPLACED GASKET YES NO ✓
PLUGS NUMBER CHECKED 1 REPLACED PLUG YES NO ✓
* CHECK VALVE NUMBER CHECKED N/A REPLACED GASKET YES NO ✓
DEEPWELL BLIND NUMBER CHECKED 1 REPLACED GASKET YES NO ✓
BELOW DECK CARGO PIPELINE BLIND NUMBER 1 REPLACED GASKET YES NO ✓
BELOW DECK CARGO PIPELINE BLIND REMOVED YES NO ✓
DRIP PANS VALVES: CLOSED BY SAM
DRIP PANS COVER: CLOSED BY SAM
CONTAINMENT AREA PLUG OR VALVES: CLOSED BY N/A

AIR TEST CARGO LINE - 40psi - USING SOAP

SIGNATURE OF TESTER: [Signature]
WITNESS: [Signature]

- * CHECK VALVE GASKET WILL BE REPLACED
- * AIR TEST IS LAST THING TO BE DONE BEFORE RELEASING BARGE.

HER 01612

JOB NO. _____
BARGE NO. D-DA 964
CUSTOMER _____
PRODUCT METHANOL

ETA _____
DATE/TIME ARRIVAL _____
DATE/TIME STARTED _____
DATE/TIME COMPLETED _____

DISPOSAL AMOUNT _____ AMOUNT STRIPPED 500
CLEANING INSTRUCTION BY: _____ BY: _____
COMPLETION SCHEDULE BY: _____
OVERTIME AUTHORIZED BY: _____
BARGE INSPECTED BY: Claudio Duarte DATE/TIME: _____
BARGE RELEASED TO: Robert DATE/TIME: _____
DEEPWELL OPENED: YES ☒ NO ☐ CLOSED BY Joan NEW GASKET YES ☒ NO ☐
BELOW DECK CARGO PIPELINE: BLIND OPEN YES ☐ NO ☒ CLOSED BY _____ NEW GASKET _____
DECK CHECK VALVE OPENED: YES N/A NO ☐ CLOSED BY _____ NEW GASKET YES ☐ NO ☐
DECK HEADER BLINDS OPEN: YES ☒ NO ☐ CLOSED BY SANI NEW GASKET YES ☐ NO ☒
DECK HEADER DRAIN PLUG OPEN: YES ☒ NO ☐ CLOSED BY SANI
VAPOR RECOVERY HEADER OPENED: YES ☒ NO ☐ CLOSED BY JOE NEW GASKET YES ☐ NO ☒
RUST SCALE: YES ☐ NO ☒ WASHED OUT ☐ BUCKETED OUT ☐
NUMBER OF CARGO TANKS 3
CONDITION OF TANK VALVES Good
PIPE DECK STRIPPED: YES N/A NO ☐ PIPE PRESSURE TEST DATE: _____
DRIP PANS STRIPPED: YES ☒ NO ☐
WEATHER: TEMP 60 RAIN ☐ FOG ☐ HUMIDITY ☐ OVERCAST ☐ CLOUDY ☒ CLEAR ☐
PIPELINE WASHED: no PIPELINE BLOWN EPS PIPELINE SUMPS INSPECTED Claudio Duarte
BOW RAKE CHECKED: YES ☒ NO ☐ STERN RAKE: YES ☒ NO ☐
VOIDS: YES ☒ NO ☐ SAFETY EQUIPMENT USED: _____

WORK SCOPE

HER 01613

HAZARDS COMMUNICATION STANDARD

OSHA 1910.1200

EMPLOYEE HAZARDOUS MATERIALS TRAINING PROGRAM

Date 3-12-85Plant HO. CULCSArea GAASE FRODOCK
D. M. 964Supervisor Charles B. Smith

Client Safety _____

The following listed materials are considered to be hazardous to the employees working in this area:

METHANOL

The employees assigned to work in this area have been informed of the hazardous materials in this area, the hazards they present to the workers, the location of hazards listed, the protective equipment that has been provided and where it is located, and procedures to be followed in case of an accidental exposure. I have received the training listed above and will so designate by signing this form.

NAME

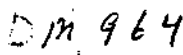
BADGE

NAME

BADGE




J. Rivera222Joe Rivera40Roger S. Bell41

HER 01614



MATERIAL SAFETY DATA SHEET (MSDS)

PAGE 1 OF 4

SECTION I		NAME		24 HOUR EMERGENCY ASSISTANCE	
PRODUCT	Methanol			CHEMTREC 800-424-9300	
CHEMICAL/ SYNONYMS	Methyl Alcohol Wood Alcohol Carbinol				
CHEMICAL FAMILY	Alcohol				
GRADE	Technical				
FORMULA	CH3OH				
CAS NO.	67-56-1	Percent 100			
MANUFACTURER/ DISTRIBUTOR	BMC 409-723-1920 P.O. Box 20339 Beaumont, TX 77720			<div><div><div><div><div></div><div>HEALTH</div></div><div><div></div><div>FIRE</div></div><div><div></div><div>REACTIVITY</div></div></div><div><div><div>NFPA</div><div>1</div></div><div><div>NPCA</div><div>2</div></div></div><div><div><div>3</div></div><div><div>3</div></div></div><div><div><div>0</div></div><div><div>0</div></div></div></div><div><div>NPCA/HMIS</div><div>NFPA HAZARD RATING 1</div><div>LEAST 0 SLIGHT 1</div><div>MODERATE 2 HIGH 3</div><div>(Personal Protection ratings to be supplied by user depending on use conditions.)</div></div></div>	

PERSONAL PROTECTIVE INFORMATION

ENGINEERING CONTROLS

Good general ventilation should be provided to keep vapor concentrations below the exposure limits.

OTHER PROTECTIVE EQUIPMENT

Have available and wear as appropriate; coverall chemical splash goggles; safety spectacles (side shield preferred); full-length face shield; hard hat with brim; flame resistant work clothing; chemical resistant gloves, clothing footwear, and apron; NIOSH/MSHA approved respiratory protection.

HEALTH INFORMATION

SAFETY PRECAUTIONS: Avoid contact with eyes, skin or clothing. Avoid prolonged or repeated breathing of vapor. Wash thoroughly after handling.

EXPOSURE LIMITS: METHANOL

OSHA Permissible Exposure Limit (PEL): 200 ppm, 260 mg/m³ -8 Hr TWA

STEL: 250 ppm, 325 mg/m3 - skin

ACGIH Threshold Limit Value (TLV): 200 ppm, 262 mg/m³ -8 Hr TWA

STEL: 250 ppm, 328 mg/m³ - skin

AEL * (BMC): 200 ppm, -8 & 12 Hr TWA - skin

*AEL is BMC Acceptable Exposure Limit: Where governmentally imposed occupational exposure limits which are lower than AEL are in effect, such limits shall take precedence.

***OTHER APPLICABLE EXPOSURE LIMITS:**

All these limits carry a "skin" notation indicating that methanol liquid and vapor can penetrate skin and mucous membrane. Therefore, control of inhalation alone may not be sufficient to prevent an excessive dose. Also, in its "Notice of Intent to Establish", ACGIH lists Biological Exposure Indices for methanol in urine of 15 mg/L (end of shift) and for formic acid in urine of 80 mg/g creatine (before the shift at end of workweek). Harmful if inhaled or absorbed through skin, causes damage to liver, kidney, and nervous system. Causes eye, skin, nose, and throat irritation. May be fatal or cause blindness if swallowed. Cannot be made nonpoisonous.

LISTED AS CARCINOGEN IN: IARC Monographs No: NTP List No: OSHA No:

OSHA HEALTH HAZARD CLASSIFICATION
None

PRIMARY ROUTES OF ENTRY
Skin/Inhalation

HER 01615

SYMPTOMS OF OVEREXPOSURE:

- ACUTE:** Human health effects of overexposure by inhalation, ingestion, or skin or eye contact may include nonspecific discomfort such as nausea, or weakness; temporary nervous system depression with anesthetic effects such as dizziness, headache, confusion, incoordination, and loss of consciousness; or blindness. Higher exposures may lead to abnormal liver function as detected by laboratory tests; abnormal kidney function as detected by laboratory tests; or fatality from gross overexposure. Ingestion of as little as 60 mL may cause blindness or fatality. No evidence of reproductive effects has been reported for humans. Skin permeation can occur in amounts capable of producing systems toxicity.
- CHRONIC:** Individuals with preexisting diseases of the retina or liver may have increased susceptibility to the toxicity of excessive exposures.

TOXIC DATA: Inhalation 1-hour LC50: >145,000ppm in rats.
 Skin Absorption LD50: 15,840 mg/kg in rabbits.
 Oral LD50: 9100 mg/kg in rats.

The compound is an eye and skin irritant. Toxic effects described in animals from short exposures by inhalation, ingestion, or skin contact include anesthetic effects, liver effects, blindness, and acidosis. Information available on reproductive effects is not sufficient to characterize the reproductive hazard. The compound produced developmental effects in rats exposed by inhalation to 10,000 or 20,000 ppm, but because maternal effects also occurred at these high concentrations, it would conclude that methanol is not a significant hazard to the conceptus. Tests in bacterial or mammalian cell structures demonstrate no mutagenic activity.

SECTION IV**EMERGENCY AND FIRST AID PROCEDURES****EYE CONTACT:**

Flush eyes immediately and thoroughly for 15 minutes with water. Get medical attention if irritation persists.

SKIN CONTACT:

Immediately flush skin with plenty of water for at least 15 minutes while removing contaminated clothing and shoes. Call a physician. Wash contaminated clothing and shoes before reuse.

INHALATION:

If inhaled, immediately move to fresh air. If not breathing, give artificial respiration. If breathing is difficult, give oxygen. Call physician.

INGESTION:

As little as 60 mL may cause blindness or fatality. Immediately give two glasses of water and induce vomiting. Call physician. Never give anything by mouth to an unconscious person.

NOTES TO PHYSICIAN:

Provide standard methanol ingestion treatment. To prepare the antidote, make a solution using 100 mL of 100-proof ethyl alcohol (grain alcohol) in 2000 mL of water and give 1.5 mL/Kg of body weight, or 100 mL for an average adult. Following this, at 2-hour intervals for 4 days, give the antidote (0.5-1.0 mL/Kg of body weight, orally or intravenously to reduce the metabolism of the methanol and to allow time for its excretion. Blood ethanol levels should be 1.0-1.5 mg/mL).

SECTION V**INGREDIENTS**

COMPOSITION	PERCENT (BY WEIGHT)	CAS REGISTRY NO.
Methyl Alcohol	NA	NA

SECTION VI**PHYSICAL DATA**

BOILING POINT	VAPOR PRESSURE
64.7 deg C (148.4 deg F) at 760 mm Hg.	127 mm Hg at 25 deg C (77 deg F) 238 mm Hg at 37.7 deg C (100 deg F)

SPECIFIC GRAVITY 0.791 at 20 deg C (68 deg F)	FREEZING POINT -97.7 deg C (-143.8 deg F)	VAPOR DENSITY 1.1 (air=1.0)
SOLUBILITY IN WATER 100 WT %	EVAPORATION RATE (BUTYL ACETATE = (1.0) greater than 1	MOLECULAR WEIGHT 32.04
APPEARANCE AND ODOR: Liquid, Colorless or Clear, Faint alcoholic		
SECTION VII		
STABILITY: <input type="checkbox"/> UNSTABLE <input checked="" type="checkbox"/> STABLE	HAZARDOUS POLYMERIZATION	MAY OCCUR <input type="checkbox"/> WILL NOT OCCUR <input checked="" type="checkbox"/>
CONDITIONS AND MATERIALS TO AVOID: Do not store or mix with strong oxidizers, chronic anhydride, lead perchlorate, or perchloric acid (reacts vigorously).		
HAZARDOUS DECOMPOSITION PRODUCTS: Occurs from heat and reaction with above stated materials.		
SECTION VIII		
FIRE AND EXPLOSIONS HAZARDS		
FLASH POINT AND METHOD USED 11 deg C (52 deg F) method. (TCC)	FLAMMABLE LIMITS in air % by VOLUME	LEL 6 UEL 36
AUTOIGNITION TEMPERATURE: 385 deg C (725 deg F)		
AUTODECOMPOSITION: NA		
AIT: Actual AIT's can be affected by the concentration of vapors and oxygen, vapor/air contact time, pressure, volume, catalytic impurities, etc. Process conditions should be analyzed to determine if the AIT's may be higher or lower.		
EXTINGUISHING MEDIA: Water spray. Dry chemical. CO2. "Alcohol" Foam.		
SPECIAL FIRE FIGHTING PROCEDURES AND PRECAUTIONS: Evacuate affected area, stay upwind and avoid smoke and fumes. Use water spray to cool containers. If smoke and fumes cannot be avoided, wear self-contained breathing apparatus.		
UNUSUAL FIRE AND EXPLOSION HAZARDS: Flammable Liquid. Flame is invisible in daylight. Methanol-water mixtures will burn unless very dilute; mixtures with 25% or more methanol are OSHA Class I flammable liquids. Follow appropriate National Fire Protection Association (NFPA) codes.		
SECTION IX		
STORAGE AND SPECIAL PRECAUTIONS		
HANDLING AND STORING PRECAUTIONS: Keep away from heat, sparks, and flame. Keep containers tightly closed. Do not store or mix with strong oxidizers, chromic anhydride, lead perchloric, or perchloric acid. Store in adequately ventilated area.		
SECTION X		
TRANSPORTATION REQUIREMENTS		
DOT CLASSIFICATION Hazard Class: 3 (Flammable Liquid)	OSHA LABEL REQUIRED NA	REPORTABLE QUANTITY 5000 lbs/2270 Kg
DOT PROPER SHIPPING NAME: Methanol	UN/NA ID NUMBER UN 1230	STCC No. 4909230
DOT PLACARD Flammable	DOT/IMO PROPER SHIPPING NAME: Methanol	DOT/IMO CLASSIFICATION HAZARD CLASS: 3 (Flammable Liquid)

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SECTION X (continued) TRANSPORTATION REQUIREMENTS		
SUBSIDIARY RISK: Poison	SPECIAL INFORMATION Flash Point: 11 Deg C (51 deg F)	SHIPPING CONTAINERS: Tank Cars & Trucks, Barges Reportable quantity: 5000 lbs/2270 kg

SECTION XI SARA TITLE III INFORMATION									
NOTIFICATION									
Regulated as a Toxic Chemical under Section 313 of Title III of the Superfund Amendments and Reauthorization Act of 1986 and 40 CFR part 372.									
HAZARD CATEGORIES									
EHS	ACUTE	CHRONIC	FIRE	PRESSURE	REACTIVE	CERCLA	TOXIC	313	
No	Yes	Yes	Yes	No	No	Yes	Yes	Yes	
*CANADIAN WHMIS CLASSIFICATION: B-2, D1A; D2B									

SECTION XII		EMERGENCY ACTION - SPILL OR LEAK
EMERGENCY ACTION:		
Keep unnecessary people away; isolate spill area. AQUATIC TOXICITY: The compound has very low toxicity. The 96 hour LC50 for fathead minnows is 28,100 MG/L.		
SPILL, LEAK, OR RELEASE: NOTE: Review Fire and Explosion Hazards and Safety Precautions before proceeding with clean up. Use appropriate PERSONAL PROTECTION EQUIPMENT during clean up.		
Dike large spills. Flush spill area with plenty of water. DO NOT flush to sewer. Comply with Federal, State and Local regulations on reporting releases. The CERCLA Reportable Quantity is 5000 lbs.		
Waste Disposal: Cleaned up material may be an RCRA Hazardous Waste. The RCRA Hazardous Waste Number for Methanol is U154. Comply with Federal, State and Local regulations on disposal. If approved, incineration, bio-oxidation, subsurface injection, or a licensed disposal contractor may be used.		
FOOTNOTES:		
1. This NFPA rating applies only to short term exposure such as might be encountered under fire or related emergency conditions.		
2. Note: NR means Not Rated.		
3. NA means Not Applicable.		

DISCLAIMER

THE INFORMATION AND RECOMMENDATIONS HEREIN ARE TAKEN FROM DATA CONTAINED IN INDEPENDENT INDUSTRY RECOGNIZED REFERENCES INCLUDING NIOSH OSHA, ANSI, AND NFPA. THUS, BEAUMONT METHANOL CORPORATION, MAKES NO GUARANTEE, WARRANTY OR OTHER REPRESENTATION CONCERNING THIS SUBSTANCE, SINCE THE CONDITION OF ITS USE ARE BEYOND THE CONTROL OF THE COMPANY. BEAUMONT CHEMICAL CORPORATION DISCLAIMS ANY LIABILITY FOR LOSS OR DAMAGE INCURRED IN CONNECTION WITH THE USE OF THIS SUBSTANCE.

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